



AUBURN POLICE DEPARTMENT

Bryan Morrison, CHIEF OF Police
1215 LINCOLN WAY, AUBURN, CA 95603



APPLICATION FOR BINGO LICENSE

APPLICANT'S NAME (Print):								
			(First)	(Middle)	(Last)			
APPLICANT'S ADDRESS:								
NAME OR ORGANIZATION FOR WHICH BINGO LICENSE IS REQUESTED:								
ADDRESS:								
DESCRIPTION OF APPLICANT:								
DOB:		Height:		Weight:		Hair Color:		Eye Color:
SS#:		Birth Place:			DL #:		Exp:	
ADDRESS WHERE BINGO GAME WILL BE CONDUCTED:								
Is property owned or leased by organization?			Owned <input type="checkbox"/>		Leased <input type="checkbox"/>			
DATE(S) AND TIMES GAMES WILL BE CONDUCTED:								
<i>I declare under penalty of perjury that all statements made on this application are true and correct to the best of my knowledge, and any false statements will be grounds for refusal. Further, I agree to conduct said bingo game in strict compliance with Section 326.5 of the California Penal Code and the City of Auburn Ordinance No. 707, and also agree that said bingo license may be revoked upon violation of any such provisions. I also certify that the applicant organization is an eligible organization in accordance with Section 5-16.03 of Auburn Ordinance No. 707.</i>								
CERTIFICATE OF EXEMPTION ATTACHED:			Yes <input type="checkbox"/> No <input type="checkbox"/>					
LETTER OF GOOD STANDING FROM EXEMPTION DIVISION OF FRANCHISE TAX BOARD ATTACHED:			Yes <input type="checkbox"/> No <input type="checkbox"/>					
SIGNATURE OF PRESIDING OFFICER OF ORGANIZATION:								
SIGNATURE OF MEMBER OF ORGANIZATION WHO IS RESPONSIBLE FOR CONDUCTING BINGO GAME:								
							Date:	

POLICE USE ONLY								
APPLICATION APPROVED: Yes <input type="checkbox"/> No <input type="checkbox"/>			LICENSE FEE PAID, RECEIPT #					